



GP 1764  
#16  
413199

# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	08/943,399
		Filing Date	OCTOBER 3, 1997
		First Named Inventor	STEPHEN N. VAUGHN
		Group Art Unit	1764
		Examiner Name	S. BULLOCK
Total Number of Pages in This Submission	3	Attorney Docket Number	97B058

## ENCLOSURES (check all that apply)

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Fee Transmittal Form  | <input type="checkbox"/> Assignment Papers<br>(for an Application)                            | <input type="checkbox"/> After Allowance<br>Communication to Group  |
| <input type="checkbox"/> Amendment / Response  | <input type="checkbox"/> Drawing(s)   | <input type="checkbox"/> Appeal Communication to<br>Board of Appeals and<br>Interferences                             |
| <input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Licensing-related Papers   | <input type="checkbox"/> Appeal Communication to<br>Group<br>(Appeal Notice, Brief, Reply Brief)                      |
| <input type="checkbox"/> Extension of Time Request   | <input type="checkbox"/> Petition Routing Slip (PTO/SB/69)<br>and Accompanying Petition       | <input type="checkbox"/> Proprietary Information  |
| <input type="checkbox"/> Express Abandonment Request                                       | <input type="checkbox"/> To Convert a Provisional<br>Application                              | <input type="checkbox"/> Status Letter  |
| <input checked="" type="checkbox"/> Information Disclosure Statement                       | <input type="checkbox"/> Power of Attorney, Revocation<br>Change of Correspondence<br>Address | <input checked="" type="checkbox"/> Additional Enclosure(s)<br>(please identify below):<br><br><u>Return Postcard</u> |
| <input type="checkbox"/> Certified Copy of Priority<br>Documents)                          | <input type="checkbox"/> Terminal Disclaimer  |   |
| <input type="checkbox"/> Response to Missing Part/<br>Incomplete Application               | <input type="checkbox"/> Request for Refund   |   |
| <input type="checkbox"/> Response to Missing Parts<br>under 37 CFR 1.52 or 1.53            |   |   |

## REMARKS

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Or Individual name	Bradley A. Keller	Registration No.	37,654
Signature			
Date	March 26, 1999		

## CERTIFICATE OF MAILING

I hereby certify having information and a reasonable basis for belief that this correspondence will be deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: March 26, 1999

Typed or printed name	Linda W. Rugh
Signature	
	Date
	March 26, 1999

RECEIVED

APR 06 1999

Revised 5/98 (gdz)

GROUP ID 1700